

RECEIVED

CENTRAL FAX CENTER

Approved for use through 10/31/2002, OMB 0651-0031

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

JUN 30 2008

Modified PTO/SB/03 (09-04)

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

**REQUEST  
FOR  
CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**

Address to:  
Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Application Number	10/810,856
Filing Date	March 29, 2004
First Named Inventor	Feng
Group Art Unit	1775
Examiner Name	Baldwin, G.
Attorney Docket Number	LCM-839-1055

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for continued Examination (RCE) practice under 37 C.F.R. § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 C.F.R. § 1.114.		
a. <input checked="" type="checkbox"/> Previously submitted (Note: Any previously filed unentered amendments will be entered unless applicant instructs otherwise. If applicant does not wish to have previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).)		
i. <input checked="" type="checkbox"/> Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____	June 9, 2008	
ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____		
iii. <input type="checkbox"/> Other _____		
b. <input type="checkbox"/> Enclosed	07/01/2008 HMARZI	00000022 10810856
i. <input type="checkbox"/> Amendment/Reply	01 FC:1801	810.00 OP
ii. <input type="checkbox"/> Affidavit(s)/Declaration(s)		
iii. <input type="checkbox"/> Information Disclosure Statement (IDS)		
iv. <input type="checkbox"/> Other _____		
2. Miscellaneous		
a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)		
b. <input type="checkbox"/> Other _____		
3. Fees	The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.	
a. <input type="checkbox"/> Applicant claims "small entity" status.		
b. <input checked="" type="checkbox"/> Fees are attached as calculated below:		
i. <input checked="" type="checkbox"/> RCE fee required under 37 C.F.R. § 1.17(e)	\$810.00 (1801)/\$405.00 (2801)	\$ 810.00
ii. <input checked="" type="checkbox"/> Petition is made to extend the due date 3 months (less 2 months previously paid)		\$ 590.00
iii. <input type="checkbox"/> Other _____		\$
c. <input type="checkbox"/> Check in the amount of \$ _____ enclosed.		
d. <input checked="" type="checkbox"/> Payment by credit card (credit card payment form attached) in the amount of \$ 1400.00		
e. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiency in the fee(s) filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm), to Deposit Account No. 14-1140		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print Type)	Leonard C. Mitchard	Registration No. (Attorney/Agent)	29,009
Signature		Date	June 30, 2008

## CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on:

Name (Print Type)			
Signature		Date	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

**RECEIVED  
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
CENTRAL FAX CENTER**

In re Patent Application of

**JUN 30 2008**Atty LCM-839-1055  
Dkt.

FENG et al

C# M#  
TC/A.U. 1775

Serial No. 10/810,856

Examiner: Baldwin, G.

Filed: March 29, 2004

Date: June 30, 2008

Title: SILICON MODIFIED BOND COAT IN THERMAL BARRIER COATING FOR  
SUPERALLOYS**Mail Stop AF**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

**RESPONSE/AMENDMENT/LETTER**

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

 **Correspondence Address Indication Form Attached.****Fees are attached as calculated below:**

Total effective claims after amendment 0 minus highest number previously paid for 20 (at least 20) = 0 x \$50.00

\$0.00 (1202)/\$0.00 (2202) \$

Independent claims after amendment 0 minus highest number previously paid for 3 (at least 3) = 0 x \$210.00

\$0.00 (1201)/\$0.00 (2201) \$

If proper multiple dependent claims now added for first time, (ignore improper); add

\$370.00 (1203)/\$185.00 (2203) \$

Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s)

One Month Extension \$120.00 (1251)/\$80.00 (2251)

Two Month Extensions \$460.00 (1252)/\$230.00 (2252)

Three Month Extensions \$1050.00 (1253)/\$525.00 (2253)

Four Month Extensions \$1640.00 (1254)/\$820.00 (2254)

Five Month Extensions \$2,230.00 (1255)/\$1115.00 (2255) \$ 590.00

Terminal disclaimer enclosed, add

\$130.00 (1814)/\$65.00 (2814) \$

 Applicant claims "small entity" status.  Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee

\$180.00 (1806) \$ 0.00

Assignment Recording Fee

\$40.00 (8021) \$ 0.00

Other: RCE

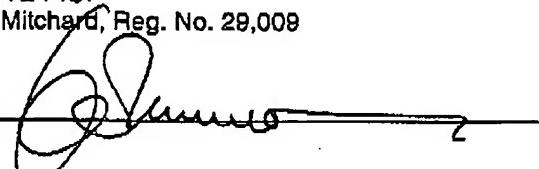
\$ 810.00

**TOTAL FEE \$ 1400.00** **CREDIT CARD PAYMENT FORM ATTACHED.**

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

901 North Glebe Road, 11th Floor  
Arlington, Virginia 22203-1808  
Telephone: (703) 816-4000  
Facsimile: (703) 816-4100  
LCM:Iff

NIXON & VANDERHYE P.C.  
By Atty: Leonard C. Mitchard, Reg. No. 29,009

Signature: 

07/01/2008 HMARZI1 00000022 10810856  
02 FC:1253 590.00 OP